APPROPRIATION FROM	APPR	OPRI	ATIC	N	FR	OM.
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ITEM &	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT	FEDERAL FUNDS
\$	\$ ,	\$	\$	\$ .	\$	\$
		.′	•			
		,	PART V			

# PART V DEPARTMENT OF HEALTH CARE POLICY AND FINANCING

·	UAA					
(1) EXECUTIVE DIRECTOR'S OFFICE <sup>32</sup>	0.4000	6.070.4150.0			275,340°	7,761,742
Personal Services AAA 14,415,497	04300	6,378,415(M)			273,540	,,, o <b>-</b> ,
(206.1 FTE)					10,156b	253,813
Health, Life, and Dental AAK 476,625	04305	212,656(M)	•	•	294 <sup>b</sup>	10,475
Short-term Disability AAU 19,332	04310	8,563(M)			234	10,115
S.B. 04-257 Amortization					500 <sup>b</sup>	15,189
Equalization Disbursement AAX 27,857	04313	12,168(M)			500	13,103
Salary Survey and Senior					8,260°	213,768
Executive Service ABB 394,534	04315	172,506(M)		•		15,150
Workers' Compensation ABQ 30,301	04325	15,151(M)			3,321 <sup>d</sup>	540,096
Operating Expenses ABV 1,070,261	04330	526,844(M)			3,321	540,070
Legal Services and Third	•	•				
Party Recovery Legal	0.4005	221 724 2 0		68,929°	5,662 <sup>b</sup>	411,168
Services for 12,684 hours ACC 817,483	04335	331,724(M)	•	00,727	0,042	
Administrative Law Judge	·	227 4660 0		•		337,465
Services ACM 674,931	04340	337,466(M)				,
Purchases of Services from ACW 156 311	04345	(1.0210.0			16,235(T) <sup>f</sup>	78,155
Computer Center 150,511	. 04343	61,921(M)			, (	
Payment to Risk			•	•		
Management and Property	04350	31,810(M)		•		31,808
Funds ADD 63,618	04330	. 51,610(111)			•	
Comital Complay Leaged						1.00.000
Capitol Complex Leased	04355	168 229(M)				168,228
Space ADL 336,457 Commercial Leased Space ADT 36,278	04355 04360	168,229(M) 18,139(M)				18,139

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	ITEM & SUBTOTAL	TOTAL	GENE FUI		GENERAL FUND EXEMPT	FUI	ASH NDS	CASH FUNDS EXEMPT	FEDERAL FUNDS
	\$	;	\$	. \$		\$	. \$	\$	
						,	٠	•	
		·			•				· · ·
Transfer to the Departmen	t		•					•	
of Human Services for	AFF 74,564	04365		37,282(M)				•	37,282
Related Administration	AFF /4,204	04303		.57,202(111)		•	•		
Medicaid Management			• •			•			
Information System Contract	AFK 22,268,047	04370		5,620,353(M)			•	351,327 <sup>g</sup>	16,296,367
Medicaid Management	22,200,017	•		,					
Information System				·		•			441.204
Reprocurement	AFO 579,600	04375	•	132,120(M)				6,086 <sup>b</sup>	441,394
Payment Error Rate		•			•			•	632,515
Measurement Project <sup>33</sup>	AFS 1,171,632	04377		539,117(M)	••				032,313
Medicare Modernization	•		•		•	•			
Act of 2003 Colorado									
Benefits Management	100 000		•	244,000(M)			*		244,000
System Development Costs	s AFW 488,000	04379		244,000(101)				,	,
Health Insurance	4								
Portability and	<i>;</i>		•						
Accountability Act of 1996 (HIPAA) Web Portal	•						•		
Maintenance	AGD 312,900	04381	•	78,225(M)	÷		,		234,675
Medicaid Authorization		,							100.524
Cards	AGJ 362,585	04385		180,534(M)		•	1,517 <sup>h</sup>		180,534
Department of Public			•					,	
Health and Environment	,								
Facility Survey and									3,058,682
Certification	AGS 4,079,161	04390		1,020,479(M)				,	2,020,000
Acute Care Utilization		0.4205	•	- 242 ፍባርሌ ጥ				2,899 <sup>i</sup>	964,398
Review	AHA 1,309,826	04395		342,529(M)					•
Long-Term Care Utilization Review	AHN 1,668,108	04400		598,813(M)	·	•			1,069,295
Childhion rotton	,			· .					

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		EM & TOTAL	TOTAL	(		ERAL IND		ENERAL FUND XEMPT		CASH FUNDS		CAS FUNI EXEM	DS	FEDERAL FUNDS
•	\$		\$	\$	٠		\$		\$		. \$		, \$	
		•	•			•							•	•
E ( al O. alita Davious	AHU	812,19	3 04405		,	203,048(1	M) .							609,145
External Quality Review Drug Utilization Review	AIA	648,02				228,256(1				•				419,769
Mental Health External		0+0,02.					/							
Quality Review	AHX	352,80	7 04407			88,202(1	M)							264,605
Actuarial Analysis		٠						•						
Payments for Transfer to	<b></b> .		0.4.400			<b>70.000</b>								50,000
the State Auditor's Office	AHZ	100,000	) 04409			50,000(1	ML)						,	. 50,000
Early and Periodic		•			•	•								
Screening, Diagnosis, and Treatment Program	AII	2,468,383	3 04415		٠	1,234,192(1	M)							1,234,191
Nursing Facility Audits	AIZ	1,097,500	0.4.400			548,750(I			•				•	548,750
Hospital and Federally		.,,												
Qualified Health Clinic						•				•				175,000
Audits	AJF	350,000	04425	•		175,000(1	M)							173,000
Disability Determination						£01 021/N	<b>N</b> (1)						5,000 <sup>j</sup>	586,831
Services	AMT	1,173,662	04475			581,831(1	(VI)							<b>,</b>
Nursing Home	+	•								• *				
Preadmission and Residen Assessments		1,010,040	) 04430	•		252,510(1	M)							757,530
Nurse Aide Certification	AKA		₹		•	144,897(1							14,652(T) <sup>k</sup>	159,549
Estate Recovery	AKV	•					•			3	350,000¹			350,000
Single Entry Point														26.500
Administration	ALC					26,500(1						٠.		26,500 17,670
Single Entry Point Audits	ALN	35,340	) 04455			17,670(1	M)							17,070
S.B. 97-05 Enrollment							<b>N</b> 40		•					437,878
Broker	ALZ	875,750	6 04460	•		437,878(1	IV1)			•			•	,
Non-Emergency	AMM	4,455,98	3 04470			2,227,994(1	M)	•						2,227,994
Transportation Services	AIVIIVI	+,+33,760	65,285,	700 UAF		۱ / ۲ / ۲ مصورت	··~) .							
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ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND	CASH FUNDS	CASH FUNDS	FEDERAL FUNDS
			EXEMPT		EXEMPT	•
\$	<b>\$</b>	\$	\$	\$	\$	<b>\$</b> .

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### (2) MEDICAL SERVICES PREMIUMS<sup>34, 35, 36, 37, 38, 39, 40, 41, 42</sup>

Services for 35,308 Supplemental Security Income Adults 65 and Older (SSI 65 +) at an

average cost of \$19,553.70 690,401,916 0448

<sup>&</sup>lt;sup>a</sup> Of this amount, \$200,042 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$40,855 shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S., and \$34,443 shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S.

b These amounts shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S.
c Of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Breast and Cervical Cancer of this amount, \$6,001 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$1,226

Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S., and \$1,033 shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S. do of this amount, \$2,370 shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S., \$701 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., and \$250 shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S.

e This amount shall be from third party recoveries.

<sup>&</sup>lt;sup>f</sup> This amount shall be from moneys in the Old Age Pension Fund appropriated to the Department of Human Services, pursuant to Article 24 of the State Constitution.

<sup>&</sup>lt;sup>g</sup> Of this amount, \$218,222 shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S., \$97,981(T) shall be from the Old Age Pension Fund appropriated to the Department of Human Services, \$32,510 shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S., \$2,347(T) shall be transferred from the Department of Public Health and Environment for the Nurse Home Visitor program, and \$267 shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S.

h This amount shall be from the Old Age Pension Health and Medical Care Fund, pursuant to Section 7 (c) of Article 24 of the State Constitution.

<sup>&</sup>lt;sup>1</sup> This amount shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S.

<sup>&</sup>lt;sup>1</sup> This amount shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S.

<sup>&</sup>lt;sup>k</sup> This amount shall be from the Department of Regulatory Agencies.

<sup>&</sup>lt;sup>1</sup> This amount shall be from estate recoveries.

APPROPRIATION FROM	Ĺ
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CASH FUNDS

GENERAL FUND EXEMPT

GENERAL FUND CASH FUNDS

EXEMPT

FEDERAL

FUNDS

	•	
Services for 5,943 Supplemental Security Income Adults 60 to 64 Years of Age (SSI 60 - 64) at an average cost of \$13,568.36 Services for 11,355 Qualified Medicare Beneficiaries (QMBs) and Special Low-Income	80,636,775	04480
Medicare Beneficiaries (SLIMBs) at an average cost of \$1,079.03 Services for 48,673 Supplemental Security Income Disabled	12,252,382	04480
Individuals at an average cost of \$11,893.25	578,880,086	04480
Services for 58,784 Categorically Eligible Low-income Adults at an average cost of \$3,941.15 Services for 8,100 Baby	231,676,837	04480
Care Program Adults at an average cost of \$7,871.49	63,759,071	04480
Services for 219 Breast and Cervical Cancer Treatment Clients at an Average Cost of \$22,341.68	4,892,827	04480

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SUBTOTAL

TOTAL

\$

		•			APPROPRIATION	FROM	
	ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT	FEDERAL FUNDS
•	\$ \$	}	\$	\$	\$	\$	
							•
Services for 236,841 Eligible Children at an average cost of \$1,351.33 Services for 16,303 Foster	320,051,275	04480			. •		. '
Children at an average cost of \$3,162.74	51,562,140	04480				·	
Services for 5,621 Non-Citizens at an average cost of \$11,131.49	62,570,082	. 04480					
Medicare Modernization Act of 2003 Maintenance of Effort Payment BAN	30,984,982	04480 2,127,668,37	UBK 73 1,047,035,00	)2(M)	76,	,512ª 36,505,064b	1,044,051,795

<sup>&</sup>lt;sup>a</sup>This amount shall be from service fees received from privately owned intermediate care facilities for the mentally retarded, pursuant to Section 26-4-410 (1) (d) (I), C.R.S. <sup>b</sup> Of this amount, \$29,119,648 represents public funds certified as representing expenditures incurred by public nursing homes and hospitals that are eligible for federal financial participation under the Medicaid program, \$6,216,752 shall be from the imposition of additional state cigarette and tobacco taxes pursuant to Section 21 of Article X of the State Constitution, \$855,289 shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S., and \$313,375 shall be from the Colorado Autism Treatment Fund created in Section 26-4-695, C.R.S.

# (3) MEDICAID MENTAL HEALTH COMMUNITY PROGRAMS

(A) Mental Health Capitation Payments for 410,171 Estimated

Medicaid Eligible Clients BEL 165,044,919 04487

82,514,992(M)

4.021a

82,525,906

<sup>&</sup>lt;sup>a</sup> This amount shall be from the Breast and Cervical Cancer Prevention and Treatment Fund created in Section 26-4-532 (7), C.R.S.

APPROPRIAT	ION	FROM

		EM & STOTAL	TOTA	NERAL	GENERAL FUND EXEMPT		CASH FUNDS	F	CASH UNDS ŒMPT	FEDERAL FUNDS
	\$	·	. \$	\$	\$	. \$	<i>:</i>	\$	\$	•. ·
(B) Other Medicaid Mental Health Paymen	UBY tş			 ·						
Medicaid Mental Health Fee for Service Payments		1,209,82	23 04495	604,912(	M)		•		·	604,911
Medicaid Mental Health Child Placement Agency	BGO	6,149,08	34 04496						6,149,084(T) <sup>a</sup>	
Medicaid Anti-Psychotic Pharmaceuticals	BGY	37,435,34 44,794,25	<del></del>						37,435,343(T) <sup>b</sup>	

<sup>&</sup>lt;sup>a</sup> This amount is shown for informational purposes only and reflects total expenditures which originate as 50 percent General Fund and 50 percent federal funds appropriated to the Department of Health Care Policy and Financing and transferred to the Department of Human Services, Division of Child Welfare.

UC 209,839,169

(4) INDIGENT CARE PROGRAM	ICI	-	•			
Safety Net Provider Payments <sup>43</sup> CAA 255,282	,024 04500	9,4	132,484(M)		118,208,528ª	127,641,012
The Children's Hospital, Clinic Based Indigent Care CAN 6,119	,760 <b>04510</b>	3,0	)59,880(M)			3,059,880
Pediatric Speciality Hospital CAP 5,452	,134 04515	2,7	726,067(M)			2,726,067
H.B. 97-1304 Children's Basic Health Plan Trust CAT 23,759	,524 04520	. 2,2	255,000	160,256b	21,344,268°	
Children's Basic Health Plan Administration CBB 4,181	,207 04530				1,947,089 <sup>d</sup>	2,234,118

<sup>&</sup>lt;sup>b</sup> This amount is shown for informational purposes only and reflects an estimate of the portion of the Medical Services Premium line item that is estimated to be Medicaid anti-psychotic pharmaceuticals.

	M & TOTAL OTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	 CASH FUNDS EXEMPT	FEDERAL FUNDS
\$	\$	\$	\$	\$	\$ \$	·
CBM 7	7,006,123 04540				27,056,309 <sup>d</sup>	49,949,814

APPROPRIATION FROM

Children's Basic Health Plan Premium Costs <sup>44</sup> CBM 77,006,123	04540		·.	27,056,309 <sup>d</sup>
Children's Basic Health Plan Dental Benefit Costs CBV 6,218,783	04550			2,176,574 <sup>d</sup>
Comprehensive Primary and Preventive Care Fund CCC 2,668,034	04555			2,668,034°
Comprehensive Primary and Preventive Care Grants Program CCM 2,668,034	04560 UC 383,355,623	CN .		2,668,034 <sup>f</sup>

<sup>&</sup>lt;sup>a</sup> This amount represents public funds certified as representing expenditures incurred by hospitals that are eligible for federal financial participation under the Medicaid Major Teaching Hospital Program, Medicaid, and the Medicaid Disproportionate Share Payments to Hospitals Program.

10,336,390

## (5) OTHER MEDICAL SERVICES UDM

Services for 4,829 Old Age
Pension State Medical
Program clients at an
average cost of \$2,225.82<sup>45</sup> DAA 10,748,483 04570
Home Care Allowance for
4,087 Recipients at an
average monthly cost of
\$221.85 DAN 10,880,411 04580

10,748,483ª

544,021(L)b

4,042,209

<sup>&</sup>lt;sup>b</sup> This amount shall be from annual premiums paid by participating families.

<sup>°</sup> This amount shall be from the Tobacco Litigation Settlement Cash Fund created in Section 24-22-115, C.R.S., pursuant to Section 24-75-1104.5 (1) (c), C.R.S.

<sup>&</sup>lt;sup>d</sup> These amounts shall be from the Children's Basic Health Plan Trust created in Section 26-19-105, C.R.S.

e This amount shall be from the Tobacco Litigation Settlement Cash Fund created in Section 24-22-115, C.R.S., pursuant to Section 24-75-1104.5 (1) (b), C.R.S.

f This amount shall be from the Comprehensive Primary and Preventive Care Fund created in Section 26-4-1007, C.R.S., pursuant to Section 24-75-1104.5 (1) (b), C.R.S.

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	ITEM & SUBTOTAL	TOTAL \$	GENERAL FUND \$	GENERAL FUND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT \$	FEDERAL FUNDS
Adult Foster Care for 58 Recipients at an average monthly cost of \$226.25 University of Colorado	DAZ 157,469	04590	149,596			7,873(L) <sup>b</sup>	
Family Medicine Residency Training Programs Enhanced Prenatal Care	DBN 1,576,502	04610	788,251(M)				788,251
Training and Technical Assistance	DBV 102,346	04620	51,173(M)	)			51,173
Nurse Home Visitor Program	DCC 3,010,000					1,505,000(T)°	1,505,000
Colorado Autism Treatment Fund	DCH 395,143	04635	,			395,143 <sup>d</sup>	
S.B. 97-101 Public School Health Services <sup>46</sup>	DCM 29,802,864	04640 56,673,218	DR			15,131,305°	14,671,559

<sup>&</sup>lt;sup>a</sup> This amount shall be from the Old Age Pension Health and Medical Care Fund, pursuant to Section 7 (c) of Article 24 of the State Constitution.

#### (6) DEPARTMENT OF HUMAN SERVICES MEDICAID-FUNDED PROGRAMS

<sup>&</sup>lt;sup>b</sup> These amounts shall be from local funds.

<sup>°</sup> This amount shall be a transfer from the Department of Public Health and Environment.

d This amount reflects the amount needed in fiscal year 2005-06 to provide funding for the state's share of the expenditures required for home- and community-based services for children with autism. This amount should be transferred at the end of fiscal year 2004-05 from the Tobacco Litigation Settlement Cash Fund created in section 24-22-115 (1), C.R.S., to the Colorado Autism Treatment Fund created in section 26-4-695, C.R.S., pursuant to section 24-22-115 (1), C.R.S.

<sup>&</sup>lt;sup>e</sup>This amount represents funds certified as representing expenditures incurred by school districts that are eligible for federal financial participation under Medicaid.

APPROPRIATIO	N FROM

	ITEM & SUBTOTAL	TOTAL	GENERAL FUND \$	GENERAL FUND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT \$	FEDERAL FUNDS
(A) Executive Director's Office - Medicaid Funding <sup>44</sup>	UEA , AA 9,704,151	04655	4,852,076(M				4,852,075
(B) Office of Information Technology Services - Medicaid Funding	UEC			, <del>-</del> 1			
Colorado Benefits Management System <sup>46a, 46b</sup>	EAL 5,370,182	04660	2,809,280(M)	)		27,784(T) <sup>a</sup>	2,533,118
Other Office of Information Technology Services line items <sup>a</sup> This amount shall be from	EAV 418,814 5,788,996		209,407(M)		ervices, pursuant to A	rticle 24 of the State Cons	209,407
(C) Office of Operations -	UEE	•	2,701,437(M				2,701,436
(D) County UEG Administration -	BN 8,797,377	04675	3,299,017(M	)			5,498,360
(E) Division of Child Welfare - Medicaid Funding Administration Child Welfare Services		04680	30,253(M 37,628,115(M	•			30,253 37,628,115
•						•	

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ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FÜND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT	FEDERAL FUNDS
\$	\$	\$	\$	\$	\$	5

<sup>&</sup>lt;sup>a</sup> This amount includes an estimated \$29,585,288 for residential treatment center care, \$4,968,285 for the children's habilitative residential program, and \$3,074,542 for the child placement agency Medicaid transfer program. These amounts are estimates of the portion of the General Fund moneys appropriated for Child Welfare Services that county departments of social services will spend on Medicaid-eligible services. Pursuant to Section 24-75-106, C.R.S., General Fund appropriations are transferred to and from this appropriation and the Child Welfare Services appropriation to the Department of Human Services when required based on the actual amount of federal Medicaid funds earned through county child welfare expenditures.

(F) Mental Health and Alcohol and Drug Abuse Services - Medicaid Funding	UEM ·						
Administration	ECM 299,003	04690		149,502(M)	•	•	149,501
Mental Health Community							•
Programs, Goebel Lawsuit Settlement	EDR 11,888,698	04708		5,944,349(M)	•		5,944,349
Residential Treatment for Youth (H.B. 99-1116)	EDT 472,423	04709		27,129(M)		209,083ª	236,211 2,261,410
Mental Health Institutes	EDV 4,522,820	04710	٠.	2,261,410(M)			
Alcohol and Drug Abuse Division, Administration	EEA 17,213	04712		8,607			8,606
Alcohol and Drug Abuse Division, High Risk Pregnant Women Program	EEE 952,986 18,153,143	04715		476,493(M)		·	476,493

<sup>&</sup>lt;sup>a</sup> This amount shall be from the Tobacco Litigation Settlement Cash Fund created in Section 24-22-115, C.R.S., pursuant to Section 24-75-1104.5 (1) (k), C.R.S.

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·		TEM & BTOTAL	. TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	CASI FUND EXEM	S	FEDERAL FUNDS
	\$	\$		\$	\$	\$	\$	\$	•
• •	•							•	
(G) Services for People with Developmental Disabilities - Medicaid					·				* ( )
Funding Community Services Administration	EEL	2,337,168	04719	1,168,5	584(M)				1,168,584
Community Services Ad Program Costs and CCI Replacement - Medicaid	MS	•	• •	•		·			111 004 0662
Funding Federally-matched Local	EEM l	223,788,132	04720	111,894,0	066(M) <sup>a</sup>		· 9'0	903,538 <sup>b</sup>	111,894,066° 9,903,538°
Program Costs Regional Centers - Medicaid Funding	EEZ	19,807,076	04727	18,932,3	324(M)		į.	743,200°	19,675,524
Regional Center Depreciation and Annua Adjustments	EFC	1,498,251	04728	749,1	26(M)				749,125
Services for Children an Families - Medicaid Funding	d EFF	3,813,077	04730	1,906,5	539(M) <sup>a</sup>	•	· · · · · · · · · · · · · · · · · · ·		1,906,538ª
	• .	290,594,752						,	· ·

<sup>&</sup>lt;sup>a</sup> Up to 3.0 percent of these funds, if not expended prior to July 1, 2006, shall be rolled forward and shall remain available for expenditure in FY 2006-07.

<sup>&</sup>lt;sup>b</sup> This amount represents funds certified as expenditures incurred by local governments that are eligible for federal financial participation under Medicaid. Up to 3.0 percent of these funds, if not expended prior to July 1, 2006, shall be rolled forward and shall remain available for expenditure in FY 2006-07.

<sup>°</sup> This amount shall be from service fees from regional centers for the developmentally disabled, pursuant to Section 26-4-410 (1) (d) (I), C.R.S.

					APPROPRI	ATION FROM	[	
	ITEM & .SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CA: FUN		CASH FUNDS EXEMPT	FEDERAL FUNDS
	\$ · .	\$	\$	\$	<b>.</b>	Φ.	٠,	•
(H) Adult Assistance Programs, Community					· :			
Services for the Elderly Medicaid Funding	EFO 1,800	04760	. 90	0(M)				900
(I) Division of Youth	UET							
Corrections - Medicaid Funding	EFZ 15,091,070	04765	7,545,53	5(M)				7,545,535
· .		428,850,89	8 UEZ			٠.		
TOTALS PART V (HEALTH CARE								
POLICY AND FINANCING) <sup>4, 5</sup>	· · · · · · · · · · · · · · · · · · ·	\$3,271,672,98	1 \$1,384,833,66	8		S11,405,697	\$285,329,027	\$1,590,104,589

<sup>&</sup>lt;sup>a</sup> Of this amount, \$45,248,426 contains an (T) notation, and \$551,894 contains a (L) notation.

**FOOTNOTES** -- The following statements are referenced to the numbered footnotes throughout section 2.

All Departments, Totals—Every department is requested to submit to the Joint Budget Committee information on the number of additional federal and cash funds exempt FTE associated with any federal grants or private donations that are applied for or received during FY 2005-06. The information should include the number of FTE, the associated cocid (such as workers' componention, health and life benefits, need for additional space, etc.) that are related to the additional FTE, the direct and indirect matching requirements associated with the federal grant or denated funds, the duration of the grant, and a brief description of the program and its goals and objectives— So 4(2) 6500 5:000.

All Departments, Totals -- The General Assembly requests that copies of all reports requested in other footnotes contained in this act be delivered to the Joint Budget Committee and the majority and minority leadership in each house of the General Assembly. Each principal department of the state is requested to produce its rules in an electronic format that is suitable for public access through electronic means. Such rules in such format should be submitted to the Office of Legislative Legal Services for publishing on the Internet. It is the intent of the General Assembly that

ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CAŞH FUNDS	CASH FUNDS EXEMPT	FEDERAL . FUNDS
\$	\$	\$	\$	\$	\$	\$

this be done within existing resources.

- Department of Health Care Policy and Financing, Executive Director's Office -- The Department is requested to submit monthly Medicaid expenditure and caseload reports on the Medical Services Premiums budget to the Joint Budget Committee, by the third Monday of each month. The Department is requested to include in the report the managed care organization caseload by aid category. The Department is also requested to provide caseload and expenditure data for the Children's Basic Health Plan within the monthly report.
- Department of Health Care Policy and Financing, Executive Director's Office, Payment Error Rate Measurement Program—Both the Medicard Proscription Drug Program Performance Audit (September 2004) and Medicaid Claims Performance Audit (December 2004) identified circumstances where the Department was over paying providers for Medicaid Services. In addition, the General for Medicare and Medicaid Services will require that the states enact payment error rate measurement programs by October 1, 2005. In order to improve the accuracy of Medicaid payments, the General Assembly provides this appropriation for a statistical sampling of billing claims for the Medicaid and Children's Basic Health Plantprogram to ensure that proper reimbursement payments are made. It is the intent of the General Assembly that a portion of the cost of this contract be paid from a reduction in claims payments from the Medical Services Promiums line item either through recomment of everpayments or through system changes that correct improper billing amounts before the claims are paid. Therefore, beginning January in 2006, the Department is requested to provide the Joint Budget Committee with a quarterly report providing information on the number of claims reviewed, the payment error rate associated with those claims, and the amount of any funding, if any, recouped from implemented corrective actions.
- Department of Health Care Policy and Financing, Medical Services Premiums—The Department is requested to submit a report on the managed care organizations! capitation rates for each population and the estimated blended rate for each aid sategory in effect for fiscal year 2005-06 to the Joint Budget Committee by July 25, 2005. The Department is requested to include in the report a copy of each managed eare organization's cortification that the reimbursement rates are sufficient to assure the financial stability of the managed care organization with respect to delivery of services to the medicaid recipionts covered in their contract pursuant to section 26-4-114 (2) (ks), C.R.S.
- Department of Health Care Policy and Financing, Medical Services Premiums -- It is the intent of the General Assembly that expenditures for these services should be recorded only against the Long Bill group total for Medical Services.
- Department of Health Care Policy and Financing, Medical Services Premiums -- The General Assembly has determined that the average appropriated rates provide sufficient funds to pay reasonable and adequate compensation to efficient and economical providers. The Department should take actions to ensure that the average appropriated rates are not exceeded.

APPROPRIATION	FROM
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ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXÉMPT	CASH FUNDS	CASH FUNDS EXEMPT	FEDERAL FUNDS
\$	\$	.\$	\$	\$	\$	\$

- Department of Health Care Policy and Financing, Medical Services Premiums—The calculations for this line item include \$7,365,778 for a 2.0—percent rate increase for inpatient hospital services provided to Medicaid clients. It is the intent of the General Assembly that the Medicai Services Board adopt rules that increase each individual hospital's Medicaid reimbursement rate by 2.0 percent for inpatient hospital services provided to Medicaid clients. The Department is also requested to provide a report to the Joint Budget Committee by August 1, 2005, on the status of the rules adopted by the Medicaid Services Board regarding this rate increase.

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- Department of Health Care Policy and Financing, Medical Services Premiums -- The Department is requested to report on reimbursements for hospital providers and to offer recommendations for changes in this area, if any. Specifically, the Department is requested to provide cost estimates for rebasing hospital rates to the most recent audited Medicare cost reports. This report is requested to be provided to the Joint Budget Committee by no later than November 1, 2005.
- Department of Health Care Policy and Financing, Medical Services Promiums. The calculations for this line item include \$6,831,445 for a reimbursement rate increase for primary care physicians. It is the intent of the General Assembly that the Medicare rate. The Department is gradually increase, reimbursement rates for the top five physician procedure codes up to eighty percent of the Medicare rate. The Department is requested to provide a report to the Joint Budget Committee by August 1, 2005, on the status of the rules adopted by Medical Services Board regarding this rate increase. The Department is requested to provide information in the report regarding which procedure codes have been increased to eighty percent of the Medicare reimbursement rate and which procedure codes are still below the eighty percent threshold and what the costs would be to increase those rates:
- Department of Health Care Policy and Financing, Medical Services Promiums—The calculations for this line item include \$4,669,275 for a 2.0—percent rate increase for home and community-based waiver services, private duty nursing services, and home health services. It is the intent of the General Assembly that the Medical Services Board adopt rules to conform to this appropriation. The Department is also requested to provide a report to the Joint Budget Committee by August 1, 2005, on the status of the rules adopted by Medical Services Board regarding this rate increase.
- Department of Health Care Policy and Financing, Medical Services Promiums—The Department is requested to report on ourrent reimbursement rates for home health providers. Specifically, the Department is requested to provide information whether a separate reimbursement structure should be used if the provider of the home health generices lives in the same residence as the client receiving the service. The Department is requested to provide information on whether any state or federal regulations would prehibit the state from developing a two tiered rate reimbursement system for a home health agency based on whether their employee is providing care to a client within the same residence. This report is requested to be provided to the Joint Budget Committee by no later than November 1, 2005.

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APPROPRIATION FROM
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ITEM & SUBTOTAL	TOTAL	GENERAL FUND	GENERAL FUND	CASH FUNDS	CASH FUNDS	FEDERAL FUNDS
		,	EXEMPT		EXEMPT	
\$	\$ .	\$	\$	\$	\$	\$

- Department of Health Care Policy and Financing, Medical Services Premiums -- Beginning in January 2006, individuals fully eligible for the Medicare and Medicaid coverage will receive their drug benefits through the Medicare Modernization Act of 2003, Part D Drug Benefit Program. While this program is anticipated to create prescription drug savings in the state's Medicaid program, these savings will be reduced by the mandatory maintenance of effort payment to the federal government. Beginning in April 2006, the Department is requested to provide the Joint Budget Committee with quarterly reports regarding the calculations for the mandatory maintenance of effort payment to the federal government for the Medicare Modernization Act of 2003. The reports should contain an estimate of how the mandatory maintenance of effort payment compares to the savings estimate of transferring the prescription drug benefit from the Medicaid program to the Medicare program.
- Department of Health Care Policy and Financing, Indigent Care Program, Safety Net Provider Payments -- The Department is requested to submit a report by February 1, 2006, to the Joint Budget Committee, estimating the final disbursements to each hospital from the Safety Net Provider Payment line item for FY 2005-06 and FY 2006-07.
- Department of Health Care Policy and Financing, Indigent Care Program, Children's Basic Health Plan Premium Costs -- This appropriation assumes an average medical cost per child of \$1,217.28 per year (\$101.44 per member per month), not including dental services, and assumes an estimated average monthly caseload of 50,395 children. The appropriation assumes 19,170 prenatal member months and 2,140 births for adult pregnant women served by the Children's Basic Health Plan waiver program.
- Department of Health Care Policy and Financing, Other Medical Services; Services for 4,829 Old Age Pension State Medical Program clients at an average cost of \$2,225.82. The Department is requested to submit a report by Nevember 1, 2005 recommending changes to benefit structure or eligibility criteria for the Old Age Pension State Medical Program in order to stay within the appropriation limit of \$10,750,000 for this program. The report should include the most recent five year expenditure history for the different medical services categories used by this population.
- Department of Health Care Policy and Financing, Other Medical Services, S.B. 97-101 Public School Health Services -- The Department is requested to submit a report by November 1 of each year to the Joint Budget Committee on the services that receive reimbursement from the federal government under S.B. 97-101 public school health service program. The report should include information on the type of services, how those services meet the definition of medical necessity, and the total amount of federal dollars that was distributed to each school under the program. The report should also include information on how many children were served by the program.
- 462 Department of Health Care Policy and Financing, Department of Human Services Medicaid Funded Programs, Office of Information Technology Services, Services Medicaid Funding, Colorado Benefits Management System, Department of Human Services, Office of Information Technology Services, Colorado Benefits Management System (CBMS) It is the intent of the General Assembly that any change requests or change orders identified

APPROPRIATION FROM	
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TEM & BTOTAL	TOTAL	GENERAL FUND	GENERAL FUND EXEMPT	CASH FUNDS	CASH FUNDS EXEMPT	FEDERAL FUNDS	
\$ \$		\$	\$	\$	\$	\$	•

by either the private sector audit or the audit commissioned by the Legislative Audit Committee be submitted by the departments to the Commission on Information Management for review and comment. 30 4(>>(05 at 5:05).

Department of Health Care Pelicy and Financing, Department of Human Services Medicaid Funded Programs, Office of Information Technology Services Medicaid Funding, Colorado Bonefits Management System; and Department of Human Services, Office of Information Technology Services, Colorado Bonefits Management System (CBMS)—The Department of Health Care Pelicy and Financing and the Department of Human Services shall submit a single report to the General Assembly by June 1, 2005, with an estimated date when CBMS will be fully operable. Included in such report shall be an estimate of the additional costs to make the system fully operable, a detailed description of the system's capabilities upon completion, a detailed analysis of appropriations to date, and system repairs or system development from these appropriations. This report shall also contain information on the State's contractual obligations with the developer of the system, including information on when the contract was signed and when the contract was amended.